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<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;"> <p><i>Filed</i> 5-5-04</p> <p>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)</p> </div> <div style="text-align: right;"> <p>SERIAL NO. <i>09/194164</i></p> <p>FILING DATE</p> </div> </div>							<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;"> <p>APPLICANT(S)</p> </div> </div>						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2				1			52						
3				1			53						
4				1			54						
5				1			55						
6				1			56						
7				1			57						
8				1			58						
9				1			59						
10				1			60						
11				1			61						
12				1			62						
13				1			63						
14				1			64						
15				1			65						
16				1			66						
17				1			67						
18			1				68						
19				1			69						
20				1			70						
21				1			71						
22				1			72						
23				1			73						
24				1			74						
25				1			75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39				1			89						
40				1			90						
41				1			91						
42				1			92						
43				1			93						
44				1			94						
45				1			95						
46				1			96						
47				1			97						
48			1				98						
49				1			99						
50			1				100						
TOTAL IND.			7				TOTAL IND.						
TOTAL DEP.			89				TOTAL DEP.						
TOTAL CLAIMS			96				TOTAL CLAIMS						

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/94/64	FILING DATE					
APPLICANT(S)													
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
/01				2			51						
/02							52						
/03				2			53						
/04				2			54						
/05				2			55						
/06				2			56						
/07				2			57						
/08				2			58						
/09				2			59						
/10				2			60						
/11				2			61						
/12				2			62						
/13							63						
/14							64						
/15				2			65						
/16				2			66						
/17				2			67						
/18				2			68						
/19				2			69						
/20				1			70						
/21				2			71						
/22				2			72						
/23				2			73						
/24				2			74						
/25				2			75						
/26				2			76						
/27				2			77						
/28				2			78						
/29				2			79						
/30				2			80						
/31							81						
/32				2			82						
/33							83						
/34			1				84						
/35			1				85						
/36				2			86						
/37				2			87						
/38				2			88						
/39				2			89						
/40				2			90						
/41				2			91						
/42				2			92						
/43				2			93						
/44				2			94						
/45				2			95						
/46				2			96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						